

SECTOR

PTO/SB/21 (12-97)

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

11

Application Number	09/053,237
Filing Date	April 1, 1998
First Named Inventor	Earl Cohen
Group Art Unit	2731
Examiner Name	Not Yet Assigned
Attorney Docket Number	CIS-032B

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Assignment Papers <i>copy</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="text"/> Declaration of Inventors Return Postcard  <input type="text"/> Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Steven A. Swernofsky	Reg. No. 33,040
Signature	<i>SA Swernofsky</i>	
Date	Oct 21, 1998	

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: *Oct 22, 1998*

Typed or printed name	Arlette Malhas	Date	Oct 22, 1998
Signature	<i>Arlette Malhas</i>		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be send to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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**FEE TRANSMITTAL**

Note: Effective October 1, 1997.  
Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)2,430*Complete if Known*

Application Number	09/053,237
Filing Date	April 1, 1998
First Named Inventor	Earl Cohen
Group Art Unit	2731
Examiner Name	Not Yet Assigned
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**METHOD OF PAYMENT** (check one)

1.  The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 50-0365  
Deposit Account Name Steven A. Swernofsky Law Offices

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17     Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance

2.  Payment Enclosed:

Check     Money Order     Other

**FEE CALCULATION****1. FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee (\$)		
101	790	201	395	Utility filing fee	<u>290</u>
106	330	206	165	Design filing fee	
107	540	207	270	Plant filing fee	
108	790	208	395	Reissue filing fee	
114	150	214	75	Provisional filing fee	
SUBTOTAL (1)		(\$)		<u>790</u>	

**2. CLAIMS**

Total Claims	-20 =	Extra	Fee from below	Fee Paid
<u>16</u>	-20 =	<u>0</u>	X	<u>-0-</u>
<u>2</u>	-3 =	<u>0</u>	X	<u>-0-</u>

Multiple Dependent Claims    X = \_\_\_\_\_

**Large Entity** **Small Entity**

Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee Description
103	22	203	11
102	82	202	41
104	270	204	135
109	82	209	41
110	22	210	11
Claims in excess of 20		Independent claims in excess of 3	
Multiple dependent claim		Reissue independent claims over original patent	
Reissue claims in excess of 20 and over original patent		Reduced by Basic Filing Fee Paid	
SUBTOTAL (2) (\$)-0-		SUBTOTAL (3) (\$)	

Fee Paid

1301510**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee (\$)
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	400	216	200
117	950	217	475
118	1,510	218	755
128	2,060	228	1,030
119	310	219	155
120	310	220	155
121	270	221	135
138	1,510	138	1,510
140	110	240	55
141	1,320	241	660
142	1,320	242	660
143	450	243	225
144	670	244	335
122	130	122	130
123	50	123	50
126	240	126	240
581	40	581	40
146	790	246	395
149	790	249	395

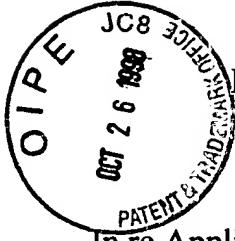
Other fee (specify) \_\_\_\_\_

Other fee (specify) \_\_\_\_\_

1,640**SUBMITTED BY**

Typed or Printed Name	Steven A. Swernofsky			Reg. Number	33,040
Signature	<u>SA Swernofsky</u>	Date	Oct. 21, 1998	Deposit Account User ID	50-0365

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Earl Cohen

Serial No. 09/053,237

Filed: April 1, 1998

For: Route/Service Processor Scalability  
Via Flow-Based Distribution of  
Traffic

Art Unit: 2731

Examiner: Not Yet Assigned

Tel:

Notice Mailed: May 4, 1998

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail, in an envelope addressed to:

Assistant Commissioner for Patents

BOX ASSIGNMENT

Washington, D.C. 20231

on 10.22.98

Date



Arlette Malhas

**RESPONSE TO NOTICE TO FILE MISSING PARTS**

Honorable Assistant Commissioner  
for Patents  
BOX ASSIGNMENT  
Washington, D.C. 20231

Dear Sir:

Responsive to the Notice to File Missing Parts dated May 4, 1998, please find enclosed herewith:

1. Declaration executed by the inventors;
2. Copy of executed assignments by the inventors to assignee Cisco Technology, Inc.;
3. Power of Attorney executed by an officer of assignee Cisco Technology, Inc.;

///

///

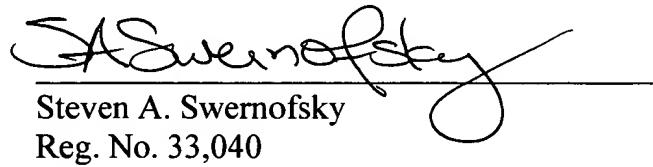
4. Check in the amount of \$920 for filing fee and surcharge for assignee as a large entity calculated as follows:

Basic filing fee — Fee Code [101/201]:	\$790
Surcharge — Fee Code [105/205]	\$130
[Any Claims over 20] — Fee Code [103/203]	\$ 0
[Indep Claims over 3] — Fee Code [102/202]	\$ 0
<b><u>TOTAL:</u></b>	<b><u>\$920</u></b>

5. Request for Extension of Time to Respond of 4 months;
6. Check in the amount of \$1,510, per Fee Code 118, for the Request for Extension of Time;
7. Check in the amount of \$40.00 for recordation of assignment — Fee Code 581;
8. Copy of Notice to File Missing Parts; and
9. Return postcard.

Respectfully submitted,

Dated: Oct. 21, 1998



\_\_\_\_\_  
Steven A. Swernofsky  
Reg. No. 33,040

The Law Offices of  
Steven A. Swernofsky  
P.O. Box 390013  
Mountain View, CA 94039-0013  
(650) 947-0700

UNITED STATES DEPARTMENT OF COMMERCE  
Patent and Trademark Office  
Address: COMMISSIONER OF PATENTS AND TRADEMARKS  
Washington, D.C. 20231

APPLICATION NUMBER

FILING/RECEIPT DATE

FIRST NAMED APPLICANT

ATTORNEY DOCKET NO/STL

0232/0504

03/11/93

CHEN

E-1 CTS-0322-B

STEVEN A SWERNOFSKY  
POST OFFICE 390013  
MOUNTAIN VIEW CA 94039-0013

NOT ASSIGNED

2731

DATE MAILED:

05/04/98

**NOTICE TO FILE MISSING PARTS OF APPLICATION**

*Filing Date Granted*

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a). If any of items 1 or 3 through 5 are indicated as missing, the SURCHARGE set forth in 37 CFR 1.16(e) or  \$65.00 for a small entity in compliance with 37 CFR 1.27, or  \$130.00 for a non-small entity, must also be timely submitted in reply to this NOTICE to avoid abandonment.

If all required items on this form are filed within the period set above, the total amount owed by applicant as a small entity (statement filed)  non-small entity is \$ 92.00

The statutory basic filing fee is:

missing

insufficient

Applicant must submit \$ 79.00

to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).

2. Additional claim fees of \$ \_\_\_\_\_, including any multiple dependent claim fees, are required.

\$ \_\_\_\_\_

for

Independent claims over 3.

\$ \_\_\_\_\_

for

dependent claims over 20.

\$ \_\_\_\_\_

for multiple dependent claim surcharge.

Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.

3. The oath or declaration:

- is missing or unexecuted.
- does not cover the newly submitted items.
- does not identify the application to which it applies.
- does not include the city and state or foreign country of applicant's residence.

An oath or declaration in compliance with 37 CFR 1.63, including residence information and identifying the application by the above Application Number and Filing Date is required.

4. The signature(s) to the oath or declaration to be by a person other than inventor or person qualified under 37 CFR 1.42, 1.44 or 1.47.

A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.

5. The signature of the following joint inventor(s) is missing from the oath or declaration:

An oath or declaration in compliance with 37 CFR 1.63 listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.

6. A \$50.00 processing fee is required since your check was returned without payment (37 CFR 1.21(m)).

7. Your filing receipt was mailed in error because your check was returned without payment.

8. The application does not comply with the Sequence Rules.

See attached "Notice to Comply with Sequence Rules 37 CFR 1.821-1.825."

9. OTHER

Direct the reply and any questions about this notice to "Attention: Box Missing Parts".

*A copy of this notice MUST be returned with the reply.*

Customer Service Center

Initial Patent Examination Division (703) 308-1202

1632 REVISION

PART 2 - COPY TO BE RETURNED WITH RESPONSE

Best Available Copy